

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

Small PHA Plan Update
Annual Plan for Fiscal Year: 2003

**NOTE: THIS PHA PLAN TEMPLATE (HUD-50075) IS TO BE COMPLETED IN
ACCORDANCE WITH THE INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

PHA Plan Agency Identification

PHA Name: Norwich Housing Authority

PHA Number: NY065

PHA Fiscal Year Beginning:(mm/yyyy) 07/2002

PHA Plan Contact Information:

Name: Judith Wingate - Wade

Phone: 607 - 334-5358

TDD: 800 - 662-1220

Email (if available): nha@norwich.net

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting:
(select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ Main administrative office of the local, county or State government
- ☒ Public library
- ☐ PHA website
- ☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA
- ☐ PHA development management offices
- ☐ Other (list below)

PHA Programs Administered :

☒ Public Housing and Section 8 ☐ Section 8 Only ☐ Public Housing Only

Annual PHA Plan**Fiscal Year 20 03**

[24CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the filename in parentheses in the space to the right of the title.

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Attachment G -: Capital Fund 2001 P/E Report; 2002 Annual Statement	ny065a01
Attachment H -: NHA Five -Year Goals and Plan	02 -06ny065b01

ii. Executive Summary

[24CFR Part 903.79@]

At PHA Option, provide a brief overview of the information in the Annual Plan n/a

n/a

1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

Public Housing ACOP, including the Grievance Procedure, and Section 8 Administrative Plans rewritten and updated, including anticipated implementation of Family Self-Sufficiency for Housing Choice Voucher Program. Public Housing lease updated.

2. Capital Improvement Needs

[24CFR Part 903.79(g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. ☒ Yes ☐ No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?

5. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$173,511.00.

C. ☒ Yes ☐ No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

5. Capital Fund Program Grant Submissions

6. Capital Fund Program 5 -Year Action Plan

The Capital Fund Program 5 -Year Action Plan is provided as Attachment C

5. Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment B

5. Demolition and Disposition

[24CFR Part 903.79(h)]

Applicability: Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to next component; if "yes", complete one activity description for each development.)

2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)	
1a. Development name:	
1b. Development (project) number:	
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>	
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>	
4. Date application approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>	
5. Number of units affected:	
5. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development	
7. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for units <input type="checkbox"/> Public housing for units <input type="checkbox"/> Preference for admission to other public housing or section 8 <input type="checkbox"/> Other housing for units (describe below)	
5. Timeline for activity:	
6.	Actual or projected start date of activity:
7.	Actual or projected start date of relocation activities:
c. Projected end date of activity:	

5. Voucher Homeownership Program

[24CFR Part 903.79(k)]

- A. ☐ Yes ☒ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to next component; if "yes", describe each program using the table below (copy and complete questions for each program identified.)

5. Capacity of the PHA to Administer a Section 8 Homeownership Program

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- ☐ Establishing a minimum homeowner down payment requirement of at least 3 percent and requiring that at least 1 percent of the down payment comes from the family's resources
- ☐ Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards

- ☐ Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

5. Safety and Crime Prevention: PHDEP Plan N/A

[24CFR Part 903.7(m)]

Exemptions Section 8 Only PHAs may skip to the next component PHA eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PH DEP funds.

n/a

- A. ☐ Yes ☐ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ _____

- C. ☐ Yes ☐ No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.

- D. ☐ Yes ☐ No: The PH DEP Plan is attached at Attachment _____

6. Other Information

[24CFR Part 903.79(r)]

A. Resident Advisory Board (RAB) Recommendations and PHA Response

1. ☒ Yes ☐ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If yes, the comments are attached at Attachment (Filename) F _____

3. In what manner did the PHA address those comments? (select all that apply)

- ☒ The PHA changed portions of the PHA Plan in response to comments
A list of these changes is included
☐ Yes ☐ No: below or
☒ Yes ☐ No: at the end of the RAB Comments in Attachment F _____.
☐ Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the end of the RAB Comments in Attachment _____.
☐ Other: (list below)

B. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: (provide name here) State of New York

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- ☒ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- ☒ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- ☐ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- ☒ Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)
- ☐ Other: (list below)

3. PHA Requests for support from the Consolidated Plan Agency

☐ Yes ☒ No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below) n/a

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

Definition of Substantial Deviation from the 5-Year Plan: An action item not implemented, or an unlisted item implemented.

Definition of Significant Amendment to the Annual Plan: A change in policies affecting resident life in any way.

A. Substantial Deviation from the 5-year Plan: Activities for year one, FYE 6/30/01, updated, removed as necessary, if completed, or moved ahead to current year. One item removed because of unavailability of program – Cornell participation in planning Brown Avenue project. See attached Five-Year Plan. (Attachment Hny065b01)

Significant Amendment or Modification to the Annual Plan:

**B. Public Housing Lease, A COP and Section 8 Administrative Plan all updated –new
elective earned income deduction added for public housing (child support paid out).
Capital Fund line items for NY06P06550101 amended .**

Attachment A

Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
v	PHA Plan Certification of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
v	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
v	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdiction to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
v	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
v	Most recent board -approved operating budget for the public housing program	Annual Plan: Financial Resources
v	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
n/a	Any policy governing occupancy of Police Officers in Public Housing <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
v	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
v	Public housing rent determination policies, including the method for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
✓	Schedule of flat rent offered date each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
✓	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
✓	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
✓	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
n/a	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
✓	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
n/a	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
✓	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
✓	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
✓	The HUD -approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
✓	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
n/a	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
✓	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99 -52 (HA).	Annual Plan: Capital Needs
n/a	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
n/a	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
v	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
n/a	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
n/a	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
n/a	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
v	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
v	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
n/a	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
n/a	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
n/a	PHDEP-related documentation: <ul style="list-style-type: none"> · Baseline law enforcement services for public housing developments assisted under the PHDEP plan; · Consortium agreement/s between the PHA/s participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHA/s participating in a consortium as specified under 24 CFR 761.15); · Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; · Coordination with other law enforcement efforts; · Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and · All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. 	Annual Plan: Safety and Crime Prevention
v	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Pet Policy

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
v	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
n/a	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
n/a	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Norwich Housing Authority 13 Brown Street Norwich, NY 13815		Grant Type and Number Capital Fund Program: NY06P06550100 Capital Fund Program Replacement Housing Factor Grant N o:			Federal FY of Grant: 2000
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2001 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non -CFP Funds				
2	1406 Operations	180,858		180,858	180,858
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2 -19)	180,858		180,858	180,858
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Norwich Housing Authority 13 Brown Street Norwich, NY 13815		Grant Type and Number Capital Fund Program: NY06P06550100 Capital Fund Program Replacement Housing Factor Grant Number:			Federal FY of Grant: 2000
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2001 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
24	Amount of line 20 Related to Energy Conservation Measures				

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHA's need not include information from Year One of the 5 -wide physical or management improvements -Year cycle, because this information is included in the Capital Fund Program Annual Statement.

CFP5 -Year Action Plan		
<input type="checkbox"/> Original statement <input checked="" type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
NY06P065002	Bordentown Circle	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
Construct buildings for and install emergency generators	\$195,000	FYE 6/30/2003
Replace deteriorated gate valves in apt. closets	\$4,000	FYE 6/30/2003
Install filters for cold water on water heaters	\$30,000	FYE 6/30/2003
Replace sewage lift pumps w/ 3 -phase service	\$20,000	FYE 6/30/2004
Repair/replace wood stair banisters	\$8,000	FYE 6/30/2004
Total estimated cost over next 5 years		\$257,000



PHA Public Housing Drug Elimination Program Plan

Note: THIS PHDEP Plan template (HUD 50075 - PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.

Section 1: General Information/History N/A

A. Amount of PHDEP Grant \$ _____

B. Eligibility type (Indicate with an "x") **N1** _____ **N2** _____ **R** _____

C. FFY in which funding is requested _____

D. Executive Summary of Annual PHDEP Plan

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long.

E. Target Areas

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area. Unit count information should be consistent with that available in PIC.

PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target Area(s)	Total Population to be Served within the PHDEP Target Area(s)

F. Duration of Program

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an "x" to indicate the length of program by # of months. For "Other", identify the # of months).

12 Months _____ **18 Months** _____ **24 Months** _____

G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an "x" by each applicable Year) and provide amount of funding received. If previously funded programs havenot been closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fund Balance should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Dates should include any HUD -approved extensions or waivers. For grant extension received, place "GE" in column or "W" for waivers.

Fiscal Year of Funding	PHDEP Funding Received	Grant#	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Grant Start Date	Grant Term End Date
FY1995						
FY1996						
FY1997						
FY1998						
FY1999						

Section 2: PHDEP Plan Goals and Budget**A. PHDEP Plan Summary**

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP -funded activities. This summary should not exceed 5 -10 sentences.

B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

FFY _____ PHDEP Budget Summary	
Original statement	
Revised statement dated:	
Budget Line Item	Total Funding
9110 – Reimbursement of Law Enforcement	
9115 - Special Initiative	
9116 - Gun Buyback TAMatch	
9120 - Security Personnel	
9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	
9150 - Physical Improvements	
9160 - Drug Prevention	
9170 - Drug Intervention	
9180 - Drug Treatment	
9190 - Other Program Costs	
TOTAL PHDEP FUNDING	

C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise — not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9110 – Reimbursement of Law Enforcement		Total PHDEP Funding: \$
Goal(s)		
Objectives		

Proposed Activities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDE P Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

9115 -SpecialInitiative					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/ Source)	PerformanceIndicators
1.							
2.							
3.							

9116 -GunBuybackTAMatch					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9120 -SecurityPersonnel					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9130 –EmploymentofInvestigators					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActiviti es	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9140 – Voluntary Tenant Patrol					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1.							
2.							
3.							

9150 - PhysicalImprovements					TotalPHDEPFunding: \$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9160 -DrugPrevention					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDep Funding	OtherFunding (Amount/Source)	PerformanceIndicators

1.							
2.							
3.							

9170 -DrugInter vention					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDep Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9180 -DrugTreatment					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Person s Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9190 -OtherProgramCosts					TotalPHDEPFunds:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

**Required Attachment __D__: Resident Member on the PHA
Governing Board**

1. ☒ Yes ☐ No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board: James McAveigh

B. How was the resident board member selected: (select one)?

- ☒ Elected
☐ Appointed

C. The term of appointment is (include the date term expires): 12/31/2003

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not? n/a

- ☐ the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis
☐ the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.
☐ Other (explain):

B. Date of next term expiration of a governing board member: 06/25/2003

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Mary Lou Stewart, Mayor, City of Norwich, New York

Required Attachment ___E___: Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Golda Button
Yelta Feringa
Sarah Feringa
Marie Koenig
Mary Kruger
Audrey Morley
Virginia Rifanburg
Joanne Schraft
Patricia White

Attachment F: Comments of A dvisory Board and Explanation of PHA Response:

A meeting was held on May 13, 2002 with all members present excepting Joanne Schraft, Virginia Rifanburg and Audrey Morley.

Discussion was held regarding:

1. Capital Fund projects and schedules: Suggestions were made for future work projects:
 - PPM Community Room renovation and exit sidewalk to the "new" parking lot – to be done with Property Betterments (Operating Budget)
 - Efficiency units – create zones for electric heat – this will be accomplished with the efficiency conversions
 - Weatherstrip PPM apartment doors to keep odors out/in – can be done with Betterments
1. Pet Policy – All agreed no changes should be made, policy is working well.
2. Transfer Policy – All noted that transfer requests due to desire to relocate only are not feasible, although some residents would like to do so, it is not good management.
3. Parking Policy – residents suggested a method of assigning parking – Executive Director will present to Authority Board.
4. Community service requirements – explained that they are now included in the lease but are suspended at this time due to HUD notice.
5. Earned income elective exclusions – prior requests from residents on the RAB were discussed and it was agreed to implement another deduction along with the amount of FICA – any amounts paid OUT for child support for children outside the household, due to hardship and the fact that child support is counted as income when received.
6. Laundry rooms and garbage recycling area at PPM discussed – resident maintenance is lax in these areas and a reminder notice will be issued.

NORWICH HOUSING AUTHORITY FIVE-YEAR PLAN

NH GOALS

PRESERVE AND INCREASE THE AVAILABILITY OF DECENT, SAFE AND AFFORDABLE HOUSING

OBJECTIVES

Create additional elderly units at PPM	Create elderly homeowner units at Brown Ave.	Work with City govt, groups and individualsto improve housing	Maintain and improve existing projects
--	--	---	--

Activities

6/30/2002	Prepare plans	Seek and obtain funding	Participate in planning process, assist Cityw/CDBG	Capital needs program
6/30/2003	Seek and obtain funding; break ground	Complete construction	Participate in final plan	Capital needs program
6/30/2004	Complete construction	Complete sale of homes	Implement plan features	Capital needs program
6/30/2005	Lease-up and assess further need	Assess further need	Implement plan features	Capital needs program
6/30/2006	Develop new programs	Develop new programs	Assess plan	Capital needs program

IMPROVE THE ABILITY OF LOW-INCOME PERSONS AND FAMILIES TO ACCESS RENTAL HOUSING AND HOME OWNERSHIP OPPORTUNITIES

OBJECTIVES

Create additional elderly units at PPM	Create elderly homeowner units at Brown Ave.	Increase funding for rental assistance	Create self-sufficiency initiatives for residents and participant
--	--	--	---

Activities

6/30/2002	Prepare plans	Seek and obtain funding	Increase utilization rate	Involve other community groups
6/30/2003	Seek and obtain funding; break ground	Complete construction	Seek funding	Seek funding/resources
6/30/2004	Complete construction	Complete sale of homes	Seek funding	Implement programs
6/30/2005	Lease-up and assess further need	Assess further need	Seek funding	Assess results
6/30/2006	Develop new programs	Develop new programs	Seek funding	Develop new programs

ADDRESS THE SHELTER, HOUSING AND SERVICE NEEDS OF THE HOMELESS POOR AND OTHERS WITH SPECIAL NEEDS

OBJECTIVES

Increase shelter programs	Formulate and implement community "Continuum of Care"	Maintain and enrich Housing Council efforts
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Activities

6/30/2002	Assess needs	Assess needs	Revitalize missions	
6/30/2003	Seek funding sources	Seek funding sources w/OFC	Sponsor 4th Group Workcamp	
6/30/2004	Implement program modifications	Implement program	Facilitate programs and community forums	
6/30/2005	Create permanent solutions	Evaluate effectiveness	Continue facilitation and activism	
6/30/2006	Continue to assess needs	Continue evaluation	Continue facilitation and activism	

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Norwich Housing Authority 1 3 Brown Street, Norwich, NY 13815		Grant Type and Number Capital Fund Program Grant No: NY06P06550101 Replacement Housing Factor Grant No:			Federal FY of Grant: 2001
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2001 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non - CFP Funds				
2	1406 Operations				
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	184,480		-0-	-0-
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Non dwelling Structures				
13	1475 Non dwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
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19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	184,480		-0-	-0-
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance	45,000			
	Amount of line XX Related to Security --Soft Costs				
	Amount of Line XX related to Security --Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

PartII:SupportingPages

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Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule	
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CAPITAL FUND PROGRAM TABLES START HERE

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<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
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1	Total Non - CFP Funds				
2	1406 Operations				
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration	40,000			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	20,100			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	113,411		-0-	-0-
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Non dwelling Structures				
13	1475 Non dwelling Equipment				
14	1485 Demolition				
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19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	173,511		-0-	-0-
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance	30,000			
	Amount of line XX Related to Security --Soft Costs				
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CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)

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CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)
PartIII:ImplementationSchedule

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CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)

PartII:SupportingPages

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CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)

PHAName: NorwichHousingAuthority

CapitalFundProgramGrantNo: NY06P06550102

FederalFYofGrant: 2002

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Part III: Implementation Schedule

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NORWICH HOUSING AUTHORITY FIVE-YEAR PLAN

NH GOALS

PRESERVE AND INCREASE THE AVAILABILITY OF DECENT, SAFE AND AFFORDABLE HOUSING

OBJECTIVES

Create additional elderly units at PPM	Create elderly homeowner units at Brown Ave.	Work with City govt, groups and individualsto improve housing	Maintain and improve existing projects
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Activities

6/30/2002 6/30/2003 6/30/2004 6/30/2005 6/30/2006	Prepare plans Seek and obtain funding; break ground Complete construction Lease-up and assess further need Develop new programs	Seek and obtain funding Complete construction Complete sale of homes Assess further need Develop new programs	Participate in planning process, assist Cityw/CDBG Participate in final plan Implement plan features Implement plan features Assess plan	Capital needs program Capital needs program Capital needs program Capital needs program Capital needs program
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IMPROVE THE ABILITY OF LOW-INCOME PERSONS AND FAMILIES TO ACCESS RENTAL HOUSING AND HOME OWNERSHIP OPPORTUNITIES

OBJECTIVES

Create additional elderly units at PPM	Create elderly homeowner units at Brown Ave.	Increase funding for rental assistance	Create self-sufficiency initiatives for residents and participant
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Activities

6/30/2002 6/30/2003 6/30/2004 6/30/2005 6/30/2006	Prepare plans Seek and obtain funding; break ground Complete construction Lease-up and assess further need Develop new programs	Seek and obtain funding Complete construction Complete sale of homes Assess further need Develop new programs	Increase utilization rate Seek funding Seek funding Seek funding Seek funding	Involve other community groups Seek funding/resources Implement programs Assess results Develop new programs
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ADDRESS THE SHELTER, HOUSING AND SERVICE NEEDS OF THE HOMELESS POOR AND OTHERS WITH SPECIAL NEEDS

OBJECTIVES

Increase shelter programs	Formulate and implement community "Continuum of Care"	Maintain and enrich Housing Council efforts
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Activities

6/30/2002 6/30/2003 6/30/2004 6/30/2005 6/30/2006	Assess needs Seek funding sources Implement program modifications Create permanent solutions Continue to assess needs	Assess needs Seek funding sources w/OFC Implement program Evaluate effectiveness Continue evaluation	Revitalize missions Sponsor 4th Group Workcamp Facilitate programs and community forums Continue facilitation and activism Continue facilitation and activism
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